

Wayne C. Luker, President
Steven N. Kline, Vice President
Michael LeFevre, Manager
Jay W. Blumenthal, Treasurer

1176 Old York Road Abington PA 19001-3713 Telephone: 267-536-1000

Zoning Hearing Notice

Notice is hereby given that the Zoning Hearing Board of the Township of Abington will hold a meeting as required by the Township's Zoning Ordinance at the Abington Township Administration Building, 1176 Old York Road, Abington, Pennsylvania, on:

Tuesday, March 15, 2016 at 7:00 p.m., at which time a public hearing will commence on the following application:

16-05: This is the application of **Nicole Rodgers**, owner of the property located at 2415 Jenkintown Road, Glenside, Pa. 19001. The applicant has requested a special exception from Section 304.2.B of the Zoning Ordinance of the Township of Abington. The applicant seeks approval to operate a family daycare, Use E-3 as an accessory use to the single family dwelling she occupies with her family.

The property is zoned within the (R-4) Residential District of Ward #13 of the Township of Abington. A copy of the application and site plan are on file with the Planning & Zoning Office and is available for review during normal business hours.

By Order of the Zoning Hearing Board.

Mark A. Penecale
Planning & Zoning Officer

Note: There is a 30 day period after the date the decision is rendered for any and all aggrieved persons to file an appeal in the appropriate court to contest the actions of the Zoning Hearing Board. Applicants that take action on a Zoning Hearing Board Approval during the 30 day appeal period, do so at their own risk. If there are questions that you may have, please feel free to contact the Zoning Officer at 267-536-1017. If you are unable to attend the hearing, written comment may be entered into the record by submitting them in advance of the hearing to the Planning & Zoning Officer.



Township of Abington
1176 Old York Road
Abington, Pa. 19001

Application to the Zoning Hearing Board

Notice: This application must be accompanied by a minimum of 10 copies of the Plot Plan of the property, prepared and signed by a Registered Land Surveyor or Professional Engineer. The plan must include lot area, lot dimensions, coverage percentages, existing structures, other improvements, proposed improvements, off-street parking, buffers and all characteristics on the site.

The Undersigned herein makes application for:

- Request for Variance from the Zoning Ordinance.
- Request for a Special Exception as provided by the Zoning Ordinance.
- Appeal from the actions of the Zoning Officer.

1. Name & Address of the Owner of the Land: Phone #:
Nicole Rodgers
2415 Jenkintown Rd
Glenside Pa. 19038
267-688-9000
2. Name & Address of the Applicant: Phone #:
Nicole Rodgers
2415 Jenkintown Rd
Glenside Pa. 19038
267-688-9000
3. Name & Address of the Attorney: Phone #:
4. If the applicant is not the owner of the property, list the applicant's interest in filing this application: Example: equitable owner, agent, lessee, etc.
5. Description of the property: 2415 Jenkintown Rd
Address/Location: Glenside Pa. 19038
Present Use: Single Family
Proposed Improvement: Family Daycare

6. State briefly the reasons for which the proposed improvements or use does not meet the requirements of the Zoning Ordinance, and the nature of relief you are seeking: *Special exception for 304.2.B to allow for a family daycare to be ~~at~~ run out of the home.*
7. List the specific section of the Zoning Ordinance upon which the application for a variance or special exception is based: *Section 304.2 B*
8. Describe in detail the grounds for the appeal, or the reasons both in law and in fact for the granting of the variance or special exception. describing in detail the nature of the unique circumstances, and the specific hardship justifying your request for approval of the application. *The State and the district allows for a family daycare to be run out of home.*
9. List any and all prior Zoning Hearing Board action regarding the property. List the date, case number and the nature of the zoning relief granted.
10. List any and all additional information, records, transcripts which may be helpful to the Zoning Hearing Board in rendering a decision: A minimum of (8) copies are required to be submitted. *See attach ~~photo~~ photos and package*

The undersigned herewith declares this submission to be true and correct facts as known.

[Signature]
 {Signature of Applicant}

[Signature]
 {Signature of Owner}

Internal Validation:
 Date Received: 2/10/16
 Fee Paid: \$200.00
 Case: 16-05

[Signature]
 Signature of the Zoning Officer

check # 203
 Rec # 881678

RECEIVED
 FEB 10 2016
 BY: *[Signature]*

Office of Children, Youth &
Families



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

ChildLine & Abuse Registry
Criminal Verification Unit
P. O. Box 8053
Harrisburg, PA 17105-8053
(717) 772-1220

NICOLE TAHIRA WILLIAMS
2415 JENKINTOWN RD
GLENSIDE, PA 19038

SSN: XXX-XX-6935
TCN: DPW5908078

Your Federal Bureau of Investigation (FBI) fingerprint based record check has been processed in accordance with Public Law 92-544 and the Child Protective Services Law (Title 23, Pa C.S. Chapter 63). **The following is the result of your federal criminal history background check as of 06/29/2012.**

- NO RECORD EXISTS**
- RECORD EXISTS**, but conviction(s) **does not prohibit hire** in a childcare position according to the Child Protective Services Law.
- RECORD EXISTS**, but no conviction(s) is shown. This **does not prohibit hire** in a childcare position according to the Child Protective Services Law.
- DISQUALIFICATION** - Record exists and contains a conviction(s) that is grounds for denying employment in a childcare position according to the Child Protective Services Law.

If you are questioning the accuracy of this response, please submit court documents to support your position. You may request a copy of your record from one year following receipt of verification by making a written request to the address listed above. Applicants are required to provide this verification to the prospective employer immediately upon receipt.

Sincerely,

A handwritten signature in black ink, appearing to read 'Terry L. Clark', written over a light grey background.

Terry L. Clark, Director
Division of Operations and Quality Management



PENNSYLVANIA CHILD ABUSE HISTORY CERTIFICATION

00193875120010101

NICOLE T. RODGERS
2415 JENKINTOWN RD
GLENSIDE, PA 19038

CERTIFICATION ID: WVQCQHDV56
CERTIFICATION PURPOSE: EMPLOYMENT
VERIFICATION DATE: 11/23/2015
SOCIAL SECURITY #: XXX-XX-6935
DATE OF BIRTH: 4/9/1975

The above named person has applied for a Pennsylvania Child Abuse History Certification pursuant to 23 Pa. C.S., Chapter 63 related to the Child Protective Services Law. NO RECORDS EXIST in the Pennsylvania Department of Human Services' Statewide database listing the applicant as a perpetrator of an Indicated or Founded report of child abuse.

Applicants are required to show the Administrator the results of their Child Abuse History Certification. Administrators are required to keep a copy of this Child Abuse History Certification on file. Any person altering the contents of this document may be subject to civil, criminal or administrative action.

ISSUED BY Commonwealth of Pennsylvania
Department of Human Services
CHILDLINE AND ABUSE REGISTRY
ChildLine Verification Unit
P.O. Box 8170
Harrisburg, PA 17105-8170
1-877-371-5422

ANY ALTERATION OR ERASURE VOIDS THIS DOCUMENT



Certificate of Completion

Recognizing and Reporting Child Abuse: Mandated and Permissive Reporting in Pennsylvania

Meets ACT 31 of 2014 training requirements
Meets the Recognizing Child Abuse and Mandated Reporting components of
ACT 126 of 2013 training requirements
3 continuing education hours

Presenter:

University of Pittsburgh School of Social Work,
PA Child Welfare Resource Center
403 East Winding Hill Road, Mechanicsburg, PA 17055



Presented to:

Rodgers, Nicole

on the date:
9/24/2015

Provider Number:
CACE000004

CE Course Number:
PCW000001

*Tracy Soska, Director of
Continuing Education
School of Social Work*

*Maryrose McCarthy,
Director PA Child Welfare
Resource Center*



NICOLE RODGERS

has attended the

FAMILY CHILD CARE HOME ORIENTATION

presentation by the

OFFICE OF CHILD DEVELOPMENT AND EARLY LEARNING

Southeast Regional Office

On

JANUARY 13TH, 2016

Acting Regional Director

Training Certification Representative

VALID UNTIL JANUARY 13TH, 2017

***City of Philadelphia
Department of Public Health***

In - Home Day Care

Food Establishment Personnel Food Safety Certificate

This is to certify that

Nicole T. Williams

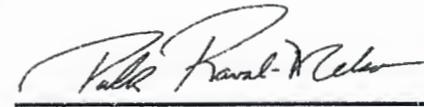
has met the requirements of the Food Establishment Personnel Food Safety Certificate as established by ordinance. This certification may be revoked upon finding that the certified holder has not complied with the obligation or applicable regulations of Title §6-301 of the Philadelphia Health Code.

Certificate No. D03846

Expiration April 01, 2017

(This Certificate is Non-transferable)

This Certificate MUST be publicly displayed



**Palak Raval-Nelson, Chief
Office of Food Protection**





